FEC FORM 2 STATEMENT OF CANDIDACY



2016 DEC -9 AMIN: 56

1. (a) Name of Candidate (in full)			
Alejandra Campoverdi (b) Address (number and street)	☐ Check if address change	aed	2. Candidate's FEC Identification Number
1787 Tribute Road, Suite K			
(c) City, State, and ZIP Code			3. Is This New Amended Statement X (N) OR (A)
Sacramento CA 95815 4. Party Affiliation	5. Office Sought	6. State & Dist	rict of Candidate
Democratic Party	House	CA 34	
DE	SIGNATION OF PRINCIP	AL CAMPAIGI	N COMMITTEE
7. I hereby designate the following nar			nittee for the $\frac{2017}{\text{(year of election)}}$ election(s).
NOTE: This designation should be f	iled with the appropriate office listed	in the instructions.	
(a) Name of Committee (in full) Alejandra Campoverdi for	Congress		
(b) Address (number and street)			
1787 Tribute Road, Suite	K		
(c) City, State, and ZIP Code	· · · · · · · · · · · · · · · · · · ·		
Sacramento CA 95815			
	(Including Joint Fundra	aising Representativ	
NOTE: This designation should be f	iled with the principal campaign com	mittee.	
(a) Name of Committee (in full)			
(b) Address (number and street)		-, -,	
(c) City, State, and ZIP Code			
l certify that I have exa	mined this Statement and to the bes	t of my knowledge a	and belief it is true, correct and complete.
Signature of Candidate			Date .
Strandro	Campouer	di)	12/06/2016
NOTE: Submission of false, erroneous	or incomplete information may subj	ect the person signir	ng this Statement to penalties of 2 U.S.C. §437g.
	<u> </u>		FEC FORM 2 (REV. 02/2009)

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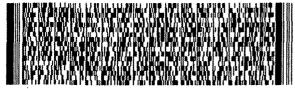
SACRAMENTO, CA 95815 UNITED STATES US

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TO FEDERAL ELECTION COMMISSION

999 E STREET NW

WASHINGTON DC 20463 (916) 285-5733 REF: CAMPOVERDI 2017 16-166 INV. PO:



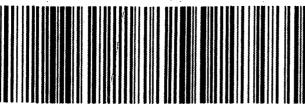
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Date of Receipt
Date of Receipt Received from Senate Public Records Office
Date of Receipt Received from Electronic Filing Office
Other (Specify): Date of Receipt or Postmarked
12/9/16
PREPARER DATE PREPARED (3/2015)